



**Form CPF M 102A: Amendment to Campaign Finance Report  
Municipal Form  
Office of Campaign and Political Finance**

Commonwealth  
of Massachusetts

File with: City or Town Clerk or Election Commission

**Report Being Amended:** Year: 2017 Reporting Period: Beginning Date: AUG. 26, 2017 Ending Date: OCT. 20, 2017

8th day preceding preliminary     8th day preceding election     30 day after election     year-end report     dissolution

**THOMAS KHOURY**

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Candidate Full Name (if applicable)  
**477 SHERMAN STREET, FALL RIVER, MA 02723**

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Residential Address  
**SCHOOL COMMITTEE**

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Office Sought and District

E-mail: TAZRF7 @ Yahoo.Com

Phone # (optional): 508-675-2883

**COMMITTEE TO ELECT TOM KHOURY**

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Committee Name

**CHARLENE KHOURY**

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Name of Committee Treasurer  
**477 SHERMAN STREET, FALL RIVER, MA 02723**

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Committee Mailing Address

E-mail: CKhoury1055 @ Yahoo.com

Phone # (optional): 508-675-2883

SUMMARY BALANCE INFORMATION:	
Line 1: Ending Balance from previous report	2,280
Line 2: Total receipts this period	1,940
Line 3: Subtotal	4,220
Line 4: Total expenditures this period	2,564.44
Line 5: Ending Balance	1,655.56
Line 6: Total in-kind contributions this period	0
Line 7: Total (all) outstanding liabilities	1,701.95
Line 8: Name of bank(s) used: <u>SANTANDER BANK</u>	

The original filing of the above-referenced campaign finance report is being amended for the following reason(s):

REPORT WAS AMENDED BECAUSE CHECK IN THE AMOUNT OF \$200.00 FROM WAYNE CAMPOS BOUNCED ON 9/1/17 AND BANK FEE IN THE AMOUNT OF \$15.00 NOT REPORTED AS EXPENDITURES.

Signed under the penalties of perjury:

Thomas Khoury  
(Candidate's signature)      Date: 1-14-19

Signed under the penalties of perjury:

Charlene Khoury  
(Treasurer's signature)      Date: 1-14-19



# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

File with: City or Town Clerk or Election Commission

Fill in Reporting Period dates: Beginning Date: Aug. 26, 2017 Ending Date: Oct. 20, 2017

Type of Report: (Check one)

- 8th day preceding preliminary   
 8th day preceding election   
 30 day after election   
 year-end report   
 dissolution

<u>THOMAS KHOURY</u> Candidate Full Name (if applicable)	<u>Committee to Elect Tom Khoury</u> Committee Name
<u>SCHOOL Committee</u> Office Sought and District	<u>Charlene Khoury</u> Name of Committee Treasurer
<u>477 SHERMAN ST Fall River, MA 02723</u> Residential Address	<u>same</u> Committee Mailing Address
E-mail: <u>tzgrf7@yahoo.com</u>	E-mail: <u>CKhoury1055@yahoo.com</u>
Phone # (optional): <u>508-1675-2883</u>	Phone # (optional): <u>1508-675-2883</u>

### SUMMARY BALANCE INFORMATION:

Line 1: Ending Balance from previous report	<u>2,280.00</u>
Line 2: Total receipts this period (page 3, line 11)	<u>1,940.00</u>
Line 3: Subtotal (line 1 plus line 2)	<u>4,220.00</u>
Line 4: Total expenditures this period (page 5, line 14)	<u>2,564.44</u>
Line 5: Ending Balance (line 3 minus line 4)	<u>1,655.56</u>
Line 6: Total in-kind contributions this period (page 6)	<u>0</u>
Line 7: Total (all) outstanding liabilities (page 7)	<u>1701.95</u>
Line 8: Name of bank(s) used:	<u>SANTANDER BANK</u>

#### Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Charlene Khoury (Treasurer's signature) Date: 1-14-2019

#### FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only)

##### Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

##### Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury: Thomas Khoury (Candidate's signature) Date: 1-14-2019

## SCHEDULE A: RECEIPTS

*M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.*

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)

Line 9: Total Receipts over \$50 (or listed above)	
Line 10: Total Receipts \$50 and under* (not listed above)	
<b>Line 11: TOTAL RECEIPTS IN THE PERIOD</b>	← Enter on page 1, line 2

**SCHEDULE A: RECEIPTS (continued)**

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
9.14.17	Paul Peloguin <sup>856</sup> Madison St F.R.	100.00	
10-3-17	Tom Alicrim <sup>282 Milton St</sup> F.R. MA.	100.00	
10-6-17	Mike Abdow <sup>577 David St</sup> F.R. MA.	70.00	
10-6-17	Vivian Cariero <sup>68 Atlantic Blvd</sup> F.R. MA.	200.00	Retired
10-3-17	James Hornsby <sup>260 Lake Ave</sup> F.R.	200.00	Retired Pastor of St Lukes Parish
10-6-17	Robert Karem 500 Albany St F.R.	100.00	
10-20-17	JoAnn Bullard 233 Chester St F.R.	70.00	
10-20-17	Donna Catalan 89 Jules St. F.R.	70.00	
10-20-17	Joseph Ganem <sup>545</sup> Valentine St F.R.	70.00	
10-20-17	Jamison Souza 26 Eastview Ave Somerset, MA	140.00	
10-20-17	Barbara Terrio 53 Delcor St F.R.	70.00	

Line 9: Total Receipts over \$50 (or listed above) 1190.00

Line 10: Total Receipts \$50 and under\* (not listed above) 750.00

**Line 11: TOTAL RECEIPTS IN THE PERIOD** 1940.00

← Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

## SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
9-1-17	Wayne Campos	815 Montgomery St F.R. MA	Check Bounced	200.00
10-5-17	WSAR	Home St Somerset, Ma.	Radio Ads for Campaign	1407.00
10-6-17	Express Printing	102 County St F.R. MA	Signs, Tickets	462.19
10-6-17	Express Printing	102 County St F.R. MA.	Wire Stands & Signs	140.25
10-13-17	59 Media Erik Tolley	50 Main St F.R. MA	Facebook Boost	40.00
10-16-17	Santander Bank	No. Main St F.R. MA.	FEE Bank analysis	15.00

Line 12: Total Expenditures over \$50 (or listed above)	2524.44
Line 13: Total Expenditures \$50 and under* (not listed above)	40.00
<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>	<b>2564.44</b>

Enter on page 1, line 4 →

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

### SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
			Line 12: Expenditures over \$50 (or listed above)	
			Line 13: Expenditures \$50 and under* (not listed above)	
Enter on page 1, line 4 →			<b>Line 14: TOTAL EXPENDITURES IN THE PERIOD</b>	

\* If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

## SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Line 15: In-Kind Contributions over \$50 (or listed above)				0
Line 16: In-Kind Contributions \$50 & under (not listed above)				
<b>Line 17: TOTAL IN-KIND CONTRIBUTIONS</b>				

Enter on page 1, line 6 →

\* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

## SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
7/8/2017	Thomas Khoury	477 Sherman St FR-02723	Loan from Candidate	1701.95

Enter on page 1, line 7 →

**Line 18: TOTAL OUTSTANDING LIABILITIES (ALL)**

1701.95





# Form CPF M 102: Campaign Finance Report Municipal Form

Office of Campaign and Political Finance

RECEIVED

Commonwealth  
of Massachusetts

File with:  
City or Town Clerk or Election Commission

Please print or type all information, except signatures OCT 30 A 10:55

**Fill in dates:**

Reporting Period Beginning Month AUG Date 26 Year 2017 Ending Month OCT Date 20 Year 2017

**Type of report: (Check one)**

8th day preceding preliminary  8th day preceding election  30 day after election  year-end report  dissolution

Thomas Khoury  
Full Name of Candidate (if applicable)

School Committee  
Office Sought and District

477 Sherman St F.R. MA 02723  
Residential Address

508-675-2883  
Tel. No. (optional)

tzrf7@yahoo.com

Committee to Elect Tom Khoury  
Committee Name

Charlene Khoury  
Name of Committee Treasurer

477 Sherman St F.R. MA 02723  
Committee Mailing Address

508-675-2883  
Tel. No. (optional)

ckhoury1055@yahoo.com

**SUMMARY BALANCE INFORMATION:**

Line 1: Ending balance from previous report	\$ <u>578.05</u>
Line 2: Total receipts this period (page 2, line 11)	\$ <u>1940.00</u>
Line 3: Subtotal (line 1 plus line 2)	\$ <u>2518.05</u>
Line 4: Total expenditures this period (page 3, line 14)	\$ <u>2349.44</u>
Line 5: Ending balance (line 3 minus line 4)	\$ <u>168.61</u>
Line 6: Total in-kind contributions this period (page 4)	\$ <u>0</u>
Line 7: Total (all) outstanding liabilities (page 4)	\$ <u>0</u>
Line 8: Name of bank(s) used	<u>SANTANDER BANK</u>

**Affidavit of Committee Treasurer:**

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Charlene J Khoury 10.28.2017  
Treasurer's signature (in ink) Date

**FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)**

**Affidavit of Candidate: (check 1 box only)**

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:

Thomas Khoury 10.28.2017  
Candidate signature (in ink) Date

### SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more)
10/3	Tom Alicrim 282 Milton St F.R. MA	100	00	
10/6	Mike Abdow 517 David St F.R. MA	70	00	
10/20	JoAnn Bullard 233 Chester St F.R. MA	70	00	
10/20	Donna Catalan 89 Jules St F.R. MA	70	00	
10/6	Vivian Civiero 68 Atlantic Blvd F.R. MA	200	00	Retired
10/20	Joseph Ganem 545 Valentine St F.R. MA	70	00	
10/3	James Hornsby 260 Lake Ave F.R. MA	200	00	Pastor (St Lukes) Retired (Parish)
10/6	Robert Kareem 500 Albany St F.R. MA	100	00	
9/14	Paul Peloquin 856 Madison St F.R. MA	100	00	
10/20	Jamison Souza 268 Eastview Ave Somerset MA	140	00	
10/20	Barbara Terrio 53 DeKarst St F.R. MA	70	00	
Line 9: Total receipts in excess of \$50 (or listed above)		1190	00	
Line 10: Total receipts \$50 and under* (not listed above)		750	00	
Line 11: TOTAL RECEIPTS IN THE PERIOD		1940	00	Enter on page 1, line 2

\* If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount		
10/6/17	Express Printing	102 County St F.R. MA	Signs, Tickets	462	19	
10/6/17	Express Printing	102 County St F.R. MA	Wire stands Signs	140	25	
10/5/17	WSAR	Home St Somerset, MA	Radio Ads for Campaign	1407	00	
10/18/17	Fall River Reporter	695 Pleasant St New Bedford, MA	Banner Ad Header on Face Book Post	300	00	
10/13/17	59 Media Erik Tolley	So. Main St FR, MA	Face Book Boost	40	00	
				Line 12: Expenditures over \$50	2309	44
				Line 13: Expenditures \$50 and under*	40	00
				Line 14: TOTAL EXPENDITURES	2349	44

Enter on page 1, line 4

\*If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

**SCHEDULE C: "IN-KIND" CONTRIBUTIONS**

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
Enter on page 1, line 6			Line 15: In-kind over \$50	
			Line 16: In-kind \$50 and under	0
			Line 17: Total In-kind	

\* If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

**SCHEDULE D: LIABILITIES**

*M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.*

Date Incurred	To Whom Due	Address	Purpose	Amount
Enter on page 1, line 7			Line 18: OUTSTANDING LIABILITIES (ALL)	0

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.